

RI Department of Health Three Capitol Hill Providence, RI 02908-5097

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February 25, 2025

The Honorable Susan R. Donovan, Chair House Committee on Health and Human Services State House 82 Smith St. Providence, RI 02903

H 5303 – An Act Relating to Health and Safety – Healthcare Professional Complaint History Transparency Act

Dear Chair Donovan:

Please accept this letter regarding H 5303, legislation that that would require the establishment of a new searchable database of healthcare professionals' complaint histories, accessible to healthcare employers. License holders would be able to review and dispute entries inaccurately attributed to the license holder. The Rhode Island Department of Health (RIDOH) has significant concerns about this bill.

As the single public health authority in the State, it is RIDOH's responsibility to protect the public from unqualified healthcare providers, to ensure that recognized practice standards are met by licensees, and to assist in meeting State goals for maintaining acceptable qualified workforce numbers. The new database would make all complaints against healthcare professionals (including those subsequently determined to be without merit) available to healthcare employers.

The proposed legislation would stigmatize healthcare workers accused of unfounded practices, which is likely to discourage healthcare professionals from seeking employment in Rhode Island and, instead, seek employment opportunities across our borders. RIDOH is unaware of any state that has established this type of database or makes this type of complaint information available to any portion of the public, including healthcare employers. RIDOH has confirmed that Massachusetts and Connecticut do not provide access to complaints that H 5303 would provide.

As of February 2025, Rhode Island has more than 88,000 licensed healthcare professionals who would be impacted by this legislation and would need to be allowed access to portions of the database. Additionally, there are more than 3,300 licensed healthcare employers who also would have to be given access to, and be trained on the use of, this database. In the past five years, RIDOH has received, on average, more than 1,550 complaints against healthcare professionals each year. Each one of these complaints would have to be individually reviewed, redacted for HIPAA compliance and personal identifying information (PII), placed into the database with searchable terms, and tracked by RIDOH staff for updating on an ongoing basis. On average during the last 4 years, only 3% to 4% of complaints against healthcare professionals were substantiated by objective factual information and resulted in disciplinary

action. RIDOH's complaints look-up webpage can be found here: <u>Licensee Complaints</u> Department of Health

RIDOH has confirmed that its current licensing software cannot support this new database. As a result, there will be significant expenses related to the creation of the actual software program needed to create such a database and the hardware needed to host it. These costs alone will, at the very least, exceed hundreds of thousands of dollars. In addition, there would be ongoing costs associated with maintenance of this database and its security.

Funding for 3.5 RIDOH FTEs will also be needed to create and manage the database past the first year of operation. Anticipated costs are as follows:

Position	FTEs	Salary	Fringe
Program Administrator	1	\$93,088	\$58,343
Database Management System Specialist	.5	\$31,884	\$22,657
Executive Assistant	1	\$50,325	\$39,339
Senior Legal Counsel	1	\$92,782	\$58,343
TOTAL COST (Salary + Fringe)	\$446,761	•	•

Anticipated personnel costs do not include annual increases in salary and fringe benefits. These positions will be required to handle the application process for ensuring only appropriate individuals have access to the database at appropriate times (namely when hiring a particular candidate) and monitoring the database use for appropriateness; to make redactions for HIPAA/PII purposes on every complaint; to track complaints; to coordinate and handle the identity based appeals; to respond to database users' questions and issues; to create and update training materials; and to provide training to the ever-changing groups of individuals entitled to access to the database.

RIDOH is concerned the bill provides no legal process for the licensee to challenge complaints against them, except for "complaints that are inaccurately attributed to their name or license number." RIDOH would need to establish a new legal process to defend appeals. The result would be a costly system where only provable complaints are included.

By way of comparison, RIDOH's existing Prescription Drug Monitoring Program (PDMP) database costs more than \$470,000 per year in personnel costs to operate and another \$270,000 in ongoing software, maintenance, and hosting fees. RIDOH cautions that estimated costs for the new healthcare professional complaint database are likely low given that the proposed database will be more labor intensive to operate and maintain. RIDOH will be required to promulgate complex regulations identifying who can access the database and when and what information will be available. The regulations will also have to identify the process for investigation and determination of incorrect identity appeals.

I look forward to working with the sponsors of the proposed legislation to determine if any legislative and/or regulatory changes are needed to achieve the intent of the proposed legislation which presumably is focused on improved patient health and safety protections. RIDOH is unable to support this legislation. Thank you for the opportunity to comment on this

bill.

Sincerely,

Jerome M. Larkin, MD

Director

The Honorable Jason Knight CC:

The Honorable Members of the House Committee on Health and Human Services

Nicole McCarty, Esquire, Chief Legal Counsel Lynne Urbani, Director of House Policy